

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY



W-02104A
Voyager Water Company
8701 S Kolb Road
Tucson, AZ 85756

RECEIVED

SEP 17 2008

AZ CORP COMM
Director Utilities

ANNUAL REPORT
WATER

FOR YEAR ENDING

12	31	2008
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FOR COMMISSION USE

ANN 04	08
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PROCESSED BY:

9-18-09

SCANNED

COMPANY INFORMATION

Company Name (Business Name) Voyager Water Company

Mailing Address 8701 S. Kolb Road Tucson Arizona 85756
(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) 520-574-5002 Fax No. (Include Area Code) 520-574- 5390 Cell No. (Include Area Code) _____

Email Richard Gieseler@equitylifestyle.com

Local Office Mailing Address same
(street)

(city)

(state)

(zip)\

Local Office Telephone No. (Include Area code)

Fax No. (Include Area Code)

Email Address _____

MANAGEMENT INFORMATION

Management Contact: Rich Gieseler Controller
(Name) (Title)

Mailing Address 8701 S. Kolb Road

Tucson
(City)

Arizona
(State)

85756
(Zip)

520-574-5002

520-574-5390

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address Richard Gieseler@equitylifestyle.com

On Site Manager: Karen Hartwell c/o YL Technologies
(Name)

HC 70 Box 3601
(Street)

Tucson
(City)

Arizona
(State)

85706
(Zip)

520-625-1671

520-625-1922

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address _____

Statutory Agent: Corporation Service Company

2338 W. Royal Palm Rd, Ste J Phoenix AZ 85021
(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Attorney: Michael McNulty

1 S Church Street (Name) Tucson Arizona 85701
(Street) (City) (State) (Zip)

520-622-2090 520-622-3088
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input checked="" type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	87,739		87,739
304	Structures and Improvements	8,964	3,627	5,337
307	Wells and Springs	490,735	313,534	177,201
311	Pumping Equipment	225,956	85,437	140,519
320	Water Treatment Equipment	12,424	1,402	11,022
330	Distribution Reservoirs and Standpipes	435,108	201,838	233,270
331	Transmission and Distribution Mains	336,058	55,927	280,131
333	Services	688,076	77,661	610,415
334	Meters and Meter Installations	374,202	44,945	329,257
335	Hydrants	120,849	13,640	107,209
336	Backflow Prevention Devices	2,901	1,039	1,862
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	14,875	1,245	13,630
341	Transportation Equipment	14,139	1,184	12,955
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	2,812,026	801,479	2,010,547


This amount goes on the Balance Sheet Acct. No. 108



CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights	87,739		
304	Structures and Improvements	8,964	4.91%	440
307	Wells and Springs	490,735	4.91%	24,090
311	Pumping Equipment	225,956	4.91%	11,091
320	Water Treatment Equipment	12,424	4.91	610
330	Distribution Reservoirs and Standpipes	435,108	4.91	21,358
331	Transmission and Distribution Mains	336,058	4.91	16,496
333	Services	688,076	4.91	33,776
334	Meters and Meter Installations	374,202	4.91	18,368
335	Hydrants	120,849	4.91	5,932
336	Backflow Prevention Devices	2,901	4.89	142
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	14,875	4.91	730
341	Transportation Equipment	14,139	4.91	694
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	2,812,026	4.76%	133,727

This amount goes on the Comparative Statement of Income and Expense
Acct. No. 403.



BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$290,520	\$470,377
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	46,008	60,880
146	Notes/Receivables from Associated Companies	182,000	
151	Plant Material and Supplies	12,773	3,738
162	Prepayments	6,578	11,392
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$537,879	\$ 546,387
	FIXED ASSETS		
101	Utility Plant in Service	\$2,812,026	\$2,812,026
103	Property Held for Future Use	0	
105	Construction Work in Progress	0	
108	Accumulated Depreciation – Utility Plant	-667,751	-801,479
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$2,144,275	\$ 2,010,547
	TOTAL ASSETS	\$2,682,154	\$ 2,556,934

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$25,346	\$ 17,519
232	Notes Payable (Current Portion)	92,640	8,589
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits	3,821	
236	Accrued Taxes	26,107	13,726
237	Accrued Interest	392	247
241	Miscellaneous Current and Accrued Liabilities		1,412
	TOTAL CURRENT LIABILITIES	\$148,306	\$41,493
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$97,545	\$70,479
	DEFERRED CREDITS		
251	Unamortized Premium on Debt		
252	Advances in Aid of Construction	\$1,264,782	\$1,264,782
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction	707,345	689,469
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax	14,006	35,408
	TOTAL DEFERRED CREDITS	\$1,986,133	\$1,989,659
	TOTAL LIABILITIES	\$2,231,984	\$2,101,631
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$20,000	\$20,000
211	Paid in Capital in Excess of Par Value	310,702	310,702
215	Retained Earnings	119,468	124,601
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$450,170	\$455,303
	TOTAL LIABILITIES AND CAPITAL	\$2,682,154	\$2,556,934

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$473,117	\$493,547
460	Unmetered Water Revenue		
474	Other Water Revenues	134,548	54,856
	TOTAL REVENUES	\$607,665	\$548,403
	OPERATING EXPENSES		
601	Salaries and Wages		
610	Purchased Water		
615	Purchased Power	\$42,263	\$48,147
618	Chemicals	1,345	63
620	Repairs and Maintenance	31,275	23,492
621	Office Supplies and Expense	16,038	12,619
630	Outside Services	276,914	202,915
635	Water Testing	3,315	2,985
641	Rents	3,745	4,478
650	Transportation Expenses		
657	Insurance – General Liability	6,453	8,975
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	3,829	11,201
403	Depreciation Expense	94,318	133,727
408	Taxes Other Than Income		
408.11	Property Taxes	17,397	21,975
409	Income Tax	28,620	67,572
	TOTAL OPERATING EXPENSES	\$525,512	\$538,149
	OPERATING INCOME/(LOSS)	\$82,153	\$10,254
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$2,612	\$2,352
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	-7,817	-7,473
	TOTAL OTHER INCOME/(EXPENSE)	\$-5,205	\$-5,121
	NET INCOME/(LOSS)	\$76,948	\$5,133

COMPANY NAME

VOYAGER WATER COMPANY

SUPPLEMENTAL FINANCIAL DATA**Long-Term Debt**

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	4/01/1981	03/02/2003		
Source of Loan	Individual	Bank		
ACC Decision No.				
Reason for Loan	Acquire Plant	Refinance		
Dollar Amount Issued	\$53,400	\$139,296	\$	\$
Amount Outstanding	\$ 8,589	\$ 70,479	\$	\$
Date of Maturity	09/15/2010	03/02/2013		
Interest Rate	11.50%	6.25%	%	%
Current Year Interest	\$ 1,367	\$ 5,365	\$	\$
Current Year Principle	\$ 5,033	\$ 13,444	\$	\$

Meter Deposit Balance at Test Year End

\$

Meter Deposits Refunded During the Test Year

\$

COMPANY NAME	VOYAGER WATER COMPANY
Name of System:	DEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-606051	30	200	500	8	4	1972
55-508553	125	800	800	12	8	1985
55-563268	125	950	800	12	6	1997

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
15	1	75	
30	2		
350,000 gpm	1		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
200,000	2	3,000	3
330,000	1		

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	VOYAGER WATER COMPANY
Name of System:	ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4	PVC	1,231
5		
6	PVC	10,408
8	PVC	19,346
10		
12	PVC	4,720
6	AC	2,925
8	DIP	171

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X 3/4	808
3/4	222
1	12
1 1/2	1
2	5
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	2
Comp. 6	
Turbo 6	3

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT: 3 Chlorinators

STRUCTURES: Fencing and Walls

OTHER: N/A

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	VOYAGER WATER COMPANY
Name of System:	ADEQ Public Water System Number:

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2008

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	1006	11,383	12,379	
FEBRUARY	1003	9,690	12,988	
MARCH	1009	9,898	10,700	
APRIL	1008	12,743	14,784	
MAY	985	11,573	13,048	
JUNE	991	11,515	13,599	
JULY	1003	11,878	13,618	
AUGUST	1011	9,903	11,539	
SEPTEMBER	1030	10,289	12,375	
OCTOBER	1039	10,594	11,383	
NOVEMBER	1044	10,363	12,131	
DECEMBER	1053	11,624	13,681	
TOTALS →		131,453	152,225	

What is the level of arsenic for each well on your system? _____ mg/l
(If more than one well, please list each separately.) See attached

If system has fire hydrants, what is the fire flow requirement? 1,000 GPM for ____ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?
☒ (X) Yes ☐ () No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
☒ (X) Yes ☐ () No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
☐ () Yes ☒ (X) No

If yes, provide the GPCPD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	VOYAGER WATER COMPANY
Name of System:	ADEQ Public Water System Number:

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE	None	None	None
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →	0.00	0.00	0.00

OTHER (description):

COMPANY NAME VOYAGER WATER COMPANY

YEAR ENDING 12/31/2008

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2008 was: \$ 19,623.02

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

**VERIFICATION
AND
SWORN STATEMENT**
Taxes

RECEIVED

SEP 17 2009

ALCORP COMM
Director: Utilities

VERIFICATION

STATE OF ARIZONA
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)
Pima
NAME (OWNER OR OFFICIAL) TITLE
Rich Gieseler, Controller
COMPANY NAME
Voyager Water Company

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING


MONTH	DAY	YEAR
12	31	2008

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.



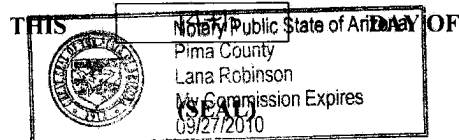
SIGNATURE OF OWNER OR OFFICIAL

520-574-5002

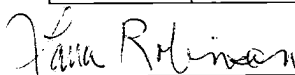
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF



COUNTY NAME	Pima	
MONTH	September	2009



SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 09/27/2010

COMPANY NAME VOYAGER WATER COMPANY **YEAR ENDING** 12/31/2008

INCOME TAXES

For the Fiscal Year ended September 30, 2008

For this reporting period, provide the following:

Federal Taxable Income Reported	<u>\$ 171,793</u>
Estimated or Actual Federal Tax Liability	50,250

State Taxable Income Reported	<u>164,133</u>
Estimated or Actual State Tax Liability	11,432

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances _____
 Amount of Gross-Up Tax Collected _____
 Total Grossed-Up Contributions/Advances _____

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.


SIGNATURE

9/14/09
DATE

Richard Gieseler
PRINTED NAME

Controller _____
TITLE

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

RECEIVED

DEPT. OF

ARIZONA CORP. COMM.
Director Utilities

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	Pima
NAME (OWNER OR OFFICIAL) TITLE	Rich Gieseler, Controller
COMPANY NAME	Voyager Water Company

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2008

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT


IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2008 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 581,176

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 32,773
IN SALES TAXES BILLED, OR COLLECTED)

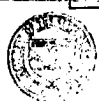
****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**


SIGNATURE OF OWNER OR OFFICIAL
620-574-5772
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 5th **DAY OF**



Notary Public, State of Arizona
Pima County
(SEAL) Lara Robinson
My Commission Expires
09/27/2010

MY COMMISSION EXPIRES

COUNTY NAME	Pima
MONTH	June
	2009



SIGNATURE OF NOTARY PUBLIC

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
Intrastate Revenues Only**

RECEIVED

SEP 20 2008

AZ. CORP. COMM
Director Utilities

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) Pima	
NAME (OWNER OR OFFICIAL) Rich Gieseler	TITLE Controller
COMPANY NAME Voyager Water Company	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2008

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2008 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES


\$ 269,796

THE AMOUNT IN BOX AT LEFT

INCLUDES **\$ 15,214**

IN SALES TAXES BILLED, OR COLLECTED)

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**


SIGNATURE OF OWNER OR OFFICIAL
520 574 5007
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

5th

DAY OF

(SEAL)

MY COMMISSION EXPIRES

09/27/2010

NOTARY PUBLIC NAME Lana Robinson	
COUNTY NAME Pima	
MONTH June	.20 09

x



SIGNATURE OF NOTARY PUBLIC

Jun. 29. 2009 11:20AM

No. 3785 P. 5

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER INORGANIC CHEMICAL ANALYSIS REPORT

SAMPLES TO BE TAKEN AT P.O.E ONLY

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

END APR 08 2008
MAP 2008

[10035] Voyager RV Park

System ID
[02/27/08 10:55] (24 hr clock)

Sample Date Sample time

System Name

I. Isaacson

Owner/Contact Person Name

520 574 5003

Owner/Contact Fax Number

SAMPLE TYPE

☒ Compliance Monitoring

Owner/Contact Person Phone Number

SAMPLE COLLECTION POINT/ID

☒ Point of Entry# [002]

POE 002

SAMPLING SITE ID

FOR MCL EXCEEDANCE OR COMPOSITE TRIGGER

[]
Original Violating Specimen Number

SAMPLE TYPE

☐ CONFIRMATION

☐ CONFIRMATION FOR COMPOSITE TRIGGER

*** INORGANIC CHEMICAL ANALYSIS ***
To be filled out by laboratory personnel

Analy Method	MCL Value	Trigger Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Results*	Exceeds MCL	Exceeds Trigger
200.8	0.050		Arsenic	1005		03/18/08 23:50	0.002	<input type="checkbox"/>	<input type="checkbox"/>
200.8	2		Barium	1010		03/18/08 23:50	0.030	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.005		Cadmium	1015		03/18/08 23:50	< 0.0005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Chromium	1020		03/18/08 23:50	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
4500F-C	4.0		Fluoride	1025		03/04/08 07:44	0.17	<input type="checkbox"/>	<input type="checkbox"/>
2450	0.002		Mercury	1035		03/04/08 13:27	< 0.0002	<input type="checkbox"/>	<input type="checkbox"/>
100.0	10	5	Nitrate (as N)	1040		02/29/08	0.86	<input type="checkbox"/>	<input type="checkbox"/>
300.0	1	0.5	Nitrite (as N)	1041		02/29/08	< 0.2	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.05		Selenium	1045		03/18/08 23:50	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.006		Antimony	1074		03/18/08 23:50	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.004		Beryllium	1075		03/21/08 02:05	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
4500CN-P	0.2		Cyanide (as free)	1024		03/03/08 15:00	< 0.03	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Nickel	1036		03/18/08 23:50	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.002		Thallium	1085		03/18/08 23:50	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
	No MCL		Sulfate	1055				<input type="checkbox"/>	<input type="checkbox"/>
200.7	No MCL		Sodium	1052		03/03/08	50	<input checked="" type="checkbox"/>	<input type="checkbox"/>

>>>> LABORATORY INFORMATION <<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

[2802280096I]

ID Number [AZ0/4/5/5] Name: [Montgomery Watson Laboratories]

Comments: [232079-2802280096]

Authorized Signature: [*[Signature]*]

Date Public Water System Notified: []

* All units must be reported in milligrams per liter (mg/l)

DWAR2: REVISED 05/08/98

Page 1 of 1

Jun. 29. 2009 11:20AM

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY No. 3785 P. 7
DRINKING WATER INORGANIC CHEMICAL ANALYSIS REPORT

SAMPLES TO BE TAKEN AT P.O.E ONLY

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[10035] Voyager RV Park

System ID

System Name

[09/13/05 09:40] (24 hr clock)

Sample Date Sample time

Owner/Contact Person Name

520 574 5003

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

☒ Compliance Monitoring

FOR MCL EXCEEDANCE OR COMPOSITE TRIGGER

[]

Original Violating Specimen Number

SAMPLE COLLECTION POINT/ID

☒ Point of Entry# [003]

SAMPLE TYPE

☐ CONFIRMATION

☐ CONFIRMATION FOR COMPOSITE TRIGGER

POE 003

SAMPLING SITE ID

*** INORGANIC CHEMICAL ANALYSIS ***
To be filled out by laboratory personnel

Analy Method	MCL Value	Trigger Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Results*	Exceeds MCL	Exceeds Trigger
200.8	0.050		Arsenic	1005		09/21/05	0.0018	<input type="checkbox"/>	<input type="checkbox"/>
200.8	2		Barium	1010		09/15/05 14:26	0.032	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.005		Cadmium	1015		09/15/05 14:26	< 0.0005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Chromium	1020		09/15/05 14:26	0.0016	<input type="checkbox"/>	<input type="checkbox"/>
	4.0		Fluoride	1025				<input type="checkbox"/>	<input type="checkbox"/>
	0.002		Mercury	1035				<input type="checkbox"/>	<input type="checkbox"/>
	10	5	Nitrate (as N)	1040				<input type="checkbox"/>	<input type="checkbox"/>
	1	0.5	Nitrite (as N)	1041				<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.05		Selenium	1045		09/15/05 14:26	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.006		Antimony	1074		09/15/05 14:26	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.004		Beryllium	1075		09/15/05 14:26	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
	0.2		Cyanide (as free)	1024				<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Nickel	1036		09/15/05 14:26	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.002		Thallium	1086		09/15/05 14:26	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
	No MCL		Sulfate	1055				<input type="checkbox"/>	<input type="checkbox"/>
200.7	No MCL		Sodium	1052		09/15/05 18:40	48	<input type="checkbox"/>	<input type="checkbox"/>

>>>>> LABORATORY INFORMATION <<<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

[2509140117I]

ID Number [AZ0/4/5/5] Name: [Montgomery Watson Laboratories]

Comments: [156519-2509140117]

Authorized Signature: []

Date Public Water System Notified: []

* All units must be reported in milligrams per liter (mg/l)

DWAR2: REVISED 05/08/98

Page 1 of 1

Jun. 29. 2009 11:20AM

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY No. 3785 P. 6
DRINKING WATER INORGANIC CHEMICAL ANALYSIS REPORT

SAMPLES TO BE TAKEN AT P.O.E ONLY

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<< MAY 2005

[10035] Voyager RV Park

System ID
[09/13/05 09:50] (24 hr clock)

System Name

END OCT 07 2005

Sample Date Sample time

Owner/Contact Person Name

520 574 5003

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

☒ Compliance Monitoring

FOR MCL EXCEEDANCE OR COMPOSITE TRIGGER

[]
Original Violating Specimen Number

SAMPLE COLLECTION POINT/ID

☒ Point of Entry# [004]

SAMPLE TYPE

☐ CONFIRMATION☐ CONFIRMATION FOR COMPOSITE TRIGGER

POE 004

SAMPLING SITE ID

*** INORGANIC CHEMICAL ANALYSIS ***
 To be filled out by laboratory personnel

Analy Method	MCL Value	trigger Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Results*	Exceeds MCL	Exceeds Trigger
200.8	0.050		Arsenic	1005		09/15/05 15:00	0.0024	<input type="checkbox"/>	<input type="checkbox"/>
200.8	2		Barium	1010		09/15/05 15:00	0.034	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.005		Cadmium	1015		09/15/05 15:00	< 0.0005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Chromium	1020		09/15/05 15:00	0.0013	<input type="checkbox"/>	<input type="checkbox"/>
	4.0		Fluoride	1025				<input type="checkbox"/>	<input type="checkbox"/>
	0.002		Mercury	1035				<input type="checkbox"/>	<input type="checkbox"/>
	10	5	Nitrate (as N)	1040				<input type="checkbox"/>	<input type="checkbox"/>
	1	0.5	Nitrite (as N)	1041				<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.05		Selenium	1045		09/15/05 15:00	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.006		Antimony	1074		09/15/05 15:00	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.004		Beryllium	1075		09/15/05 15:00	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
	0.2		Cyanide (as free)	1024				<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.1		Nickel	1036		09/15/05 15:00	< 0.005	<input type="checkbox"/>	<input type="checkbox"/>
200.8	0.002		Thallium	1085		09/15/05 15:00	< 0.001	<input type="checkbox"/>	<input type="checkbox"/>
	No MCL		Sulfate	1055				<input type="checkbox"/>	<input type="checkbox"/>
200.7	No MCL		Sodium	1052		09/15/05 18:44	47	<input type="checkbox"/>	<input type="checkbox"/>


>>>> LABORATORY INFORMATION <<<<
 To be filled out by laboratory personnel

SPECIMEN NUMBER

[2509140118I]

ID Number [AZ0/4/5/5] Name: [Montgomery Watson Laboratories]

Comments: [156519-2509140118]

Authorized Signature: []

Date Public Water System Notified: []

* All units must be reported in milligrams per liter (mg/l)

Beth Ford
Pima County Treasurer



Patti Davidson
Chief Deputy Treasurer

PIMA COUNTY TREASURER'S OFFICE

PIMA COUNTY TAX RECEIPT

VOYAGER WATER CO
8701 S KOLB RD
TUCSON AZ 85706

THIS IS YOUR RECEIPT FOR PAYMENT(S) OF 2008 REAL ESTATE TAXES

BOOK	MAP	PARCEL	TOTAL TAX ASSESSED	DATE
141	23	003X	\$ 118.35	10/21/2008

PAYMENTS					
PAYMENT DATE	DESCRIPTION	TAX PAID	INTEREST PAID	FEES PAID	TOTAL
10/17/2008	FIRST HALF	\$59.18	\$0.00	\$0.00	\$59.18
	TOTAL PAID	\$59.18	\$0.00	\$0.00	\$59.18

PROPERTY ADDRESS

TAX YEAR 2008 BALANCE DUE

DESCRIPTION	AMOUNT
FIRST HALF TAX DUE	\$0.00
SECOND HALF TAX DUE	\$59.17
NSF FEE DUE	\$0.00
RECLAIMED REFUND DUE	\$0.00
TOTAL AMOUNT DUE	\$59.17

ADDITIONAL INFORMATION

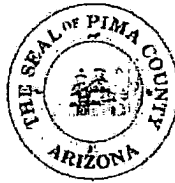
FIRST HALF TAXES ARE DUE 10/01/2008 AND DELINQUENT AFTER 11/01/2008. SECOND HALF TAXES ARE DUE 03/01/2009 AND DELINQUENT AFTER 05/01/2009. INTEREST CHARGES ACCRUE FOR PAYMENTS MADE AFTER DELINQUENCY DATES. FOR PAYMENT INFORMATION AFTER DELINQUENCY DATES, PLEASE CALL (520) 740-8341 OR VISIT WWW.TO.PIMA.GOV

Thank you for your payment!

BETH FORD
PIMA COUNTY TREASURER

115 North Church Avenue - Tucson, Arizona 85701-1199 - Phone (520) 740-8341 - Fax (520) 884-4809

Beth Ford
Pima County Treasurer



Patti Davidson
Chief Deputy Treasurer

PIMA COUNTY TREASURER'S OFFICE

PIMA COUNTY TAX RECEIPT

VOYAGER WATER COMPANY
8701 S KOLB RD
TUCSON AZ 85706-9607

THIS IS YOUR RECEIPT FOR PAYMENT(S) OF 2008 REAL ESTATE TAXES

BOOK	MAP	PARCEL	TOTAL TAX ASSESSED	DATE
141	24	0170	\$ 503.35	10/21/2008

PAYMENTS					
PAYMENT DATE	DESCRIPTION	TAX PAID	INTEREST PAID	FEES PAID	TOTAL
10/17/2008	FIRST HALF	\$251.68	\$0.00	\$0.00	\$251.68
	TOTAL PAID	\$251.68	\$0.00	\$0.00	\$251.68

PROPERTY ADDRESS	TAX YEAR 2008 BALANCE DUE	
	DESCRIPTION	AMOUNT
7690 E BENSON HY	FIRST HALF TAX DUE	\$0.00
	SECOND HALF TAX DUE	\$251.67
	NSF FEE DUE	\$0.00
	RECLAIMED REFUND DUE	\$0.00
	TOTAL AMOUNT DUE	\$251.67

ADDITIONAL INFORMATION

FIRST HALF TAXES ARE DUE 10/01/2008 AND DELINQUENT AFTER 11/01/2008. SECOND HALF TAXES ARE DUE 03/01/2009 AND DELINQUENT AFTER 05/01/2009. INTEREST CHARGES ACCRUE FOR PAYMENTS MADE AFTER DELINQUENCY DATES. FOR PAYMENT INFORMATION AFTER DELINQUENCY DATES, PLEASE CALL (520) 740-8341 OR VISIT WWW.TO.PIMA.GOV

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Beth Ford
Pima County Treasurer



Patti Davidson
Chief Deputy Treasurer

PIMA COUNTY TREASURER'S OFFICE

PIMA COUNTY TAX RECEIPT

VOYAGER WATER CO
ATTN: RICH GIESELER/CONTROLLER
8701 S KOLB ROAD
TUCSON AZ 85706-9607

THIS IS YOUR RECEIPT FOR PAYMENT(S) OF 2008 REAL ESTATE TAXES

BOOK	MAP	PARCEL	TOTAL TAX ASSESSED	DATE
908	32	0000	\$ 21,353.47	10/21/2008

PAYMENTS					
PAYMENT DATE	DESCRIPTION	TAX PAID	INTEREST PAID	FEES PAID	TOTAL
10/17/2008	FIRST HALF	\$10,676.74	\$0.00	\$0.00	\$10,676.74
	TOTAL PAID	\$10,676.74	\$0.00	\$0.00	\$10,676.74

PROPERTY ADDRESS

TAX YEAR 2008 BALANCE DUE

DESCRIPTION	AMOUNT
FIRST HALF TAX DUE	\$0.00
SECOND HALF TAX DUE	\$10,676.73
NSF FEE DUE	\$0.00
RECLAIMED REFUND DUE	\$0.00
TOTAL AMOUNT DUE	\$10,676.73

ADDITIONAL INFORMATION

FIRST HALF TAXES ARE DUE 10/01/2008 AND DELINQUENT AFTER 11/01/2008. SECOND HALF TAXES ARE DUE 03/01/2009 AND DELINQUENT AFTER 05/01/2009. INTEREST CHARGES ACCRUE FOR PAYMENTS MADE AFTER DELINQUENCY DATES. FOR PAYMENT INFORMATION AFTER DELINQUENCY DATES, PLEASE CALL (520) 740-8341 OR VISIT WWW.TO.PIMA.GOV

Thank you for your payment!

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PIMA COUNTY TREASURER

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Beth Ford
Pima County Treasurer



Patti Davidson
Chief Deputy Treasurer

PIMA COUNTY TREASURER'S OFFICE

PIMA COUNTY TAX RECEIPT

VOYAGER WATER CO
ATTN: RICH GIESELER/CONTROLLER
8701 S KOLB ROAD
TUCSON AZ 85706-9607

THIS IS YOUR RECEIPT FOR PAYMENT(S) OF 2007 REAL ESTATE TAXES

BOOK	MAP	PARCEL	TOTAL TAX ASSESSED	DATE
908	32	0000	\$ 17,270.85	3/31/2008

PAYMENTS					
PAYMENT DATE	DESCRIPTION	TAX PAID	INTEREST PAID	FEES PAID	TOTAL
03/25/2008	SECOND HALF	\$8,635.42	\$0.00	\$0.00	\$8,635.42
	TOTAL PAID	\$8,635.42	\$0.00	\$0.00	\$8,635.42

PROPERTY ADDRESS

TAX YEAR 2007 BALANCE DUE

DESCRIPTION	AMOUNT
FIRST HALF TAX DUE	\$0.00
SECOND HALF TAX DUE	\$0.00
NSF FEE DUE	\$0.00
RECLAIMED REFUND DUE	\$0.00
TOTAL AMOUNT DUE	\$0.00

Thank you for your payment!

BETH FORD
PIMA COUNTY TREASURER